Utah State Tax Commission
210 North 1950 West, Salt Lake City, Utah 84134

COVERSnet Application Only

IFTA/IRP
TC-200
Rev. 1/05

**Missing information may result in delay
or rejection of this application.**

IFTA Business Name	IRP Business Name	Social Security number/Federal ID number (EIN)
IFTA Business street address (No P. O. Box number)	IRP Business street address (No P. O. Box number)	IRP number
City, state, and ZIP code	City, state, and ZIP code	U. S. DOT number
County	County	Telephone number
Mailing Address (if different than business address)		Fax telephone number
City, state, and ZIP code		Contact person

Authorized Users of COVERSnet

Name of user	Job title	Office location	User's telephone number

I am applying for access to the COVERSnet system. I understand that this access is granted solely in conjunction with my assigned duties as a carrier or carrier representative processing documents necessary to accomplish legitimate and valid business with the Utah State Tax Commission. I am responsible for all user ID's and passwords issued to this IFTA/IRP account and will ensure that only authorized users know them. I will comply with all the Utah State Tax Commission policies on security, computer access and confidentiality of data. I understand that failure to follow these policies will result in the loss of COVERSnet access. It is my responsibility to contact Motor Carrier Services to notify them of any changes in authorized user status within one business day.

The data entered into the COVERSnet software will be true and accurate to the best of my knowledge. I agree that all data submited is subject to be audited for accuracy to ensure that the rules established by IFTA, IRP and the Utah State Tax Commission are met. If abuse or misuse is detected, I will give up my rights to process requests through the COVERSnet system.

My signature below acknowledges that I understand and will comply with the reporting, payment, record keeping and license display requirements as specified in the IFTA, IRP agreements and Utah Code. I understand that failure to comply with the provisions shall be grounds for revocation of my registration and fuel permits in all member jurisdictions. Under penalty of law, I certify under the penalties of perjury that the information submitted through COVERSnet to be true, correct and complete.

Signature	Title	Date signed
X		

For Office Use Only

Request approved by	Date	IFTA request verified by	Date	IRP request verified by	Date	Security granted by	Date